DATEMY ADDI (CATION OF DETAILS)								Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003									10705575					
CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAI (Column 1) (Column 2) TYPE OR SMALL ENTIT														
F	OTAL CLAIMS	3	6					RATE FEE		FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	ΕE	385.00	_	BASIC FEE		
TOTAL CHARGEABLE CLAIMS			/ minus 20=		. 0			XS 9:			1	¥242		
INDEPENDENT CLAIMS			1 1	/ minus 3 =		0		X43=			OR			
MULTIPLE DEPENDENT CLAIM P			RESENT			— 			-		OR	X86=		
* If the difference in column 1 is less than zero, enter "0" in column 2							+145=			OR	+290=			
								TOTAL	L		OR	TOTAL	770	
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST							SMAL	LE	 NTITY	- OR	-OTHER SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		PREVICE PAID	BER	PRESENT EXTRA		RATE		ADDI- TIONALI FEE		RATE	ADDI- TIONAL FEE	
	Total	. 4	Minus	" 0	20			X\$ 9=		/	OR	X\$18=		
ARE	Independent	1.2	Minus		3_	-		X43=		-/	OR	X86=		
┞	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	†	-/-	OR	+290=	/	
,		_					Ł	TOTA		1	- 1	TOTAL	/ -	
4	2/17/65 (Column 1) (Column 2) (Column 3)							VODIT. FE	٤L	┰	UN,	ADDIT. FEE	/	
AMENDMENT B		Claims Remaining After Amendment		HIGHI NUME PREVIO PAID F	BER USLÝ	PRESENT EXTRA		RATE		ADDI- TONAL FEE		RATE	ADDI- TIONAL EEE	
	Total*	. 4	Minus	- 2	0	. B		X\$ 9=	Τ		OR	X\$18=	A	
AME	Independent	NTATION OF MIL	Minus	OCHDENE	<u>} </u>	1-0		X43=	1		OR	X86=	K	
<u> </u>	I MOTTINGSE	STATION OF ISI	ALTIPLE DE	ENDERI	CLAIM		'[+145=	I		OR	+290÷		
				•	•	•••	A	TOTAL DOIT: FEE	L		ØЯ,	TOTAL VOOIT, FEE	0	
		(Column 1)		(Cotum		(Column 3)					•			
AMENDMENT C		REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER	PRÈSENT EXTRA		RATE	T	ADDI- ONAL FEE		PATE	ADDI- TIONAL FEE	
	Total	•	Minus	•	•	=	Γ	X\$ 9=	Γ		OR	X\$18=		
	Independent	4	Minus	***		•	ı	X43=	T			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	T		DR DR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, only "20". TOTAL														
-	If the "Highest Nu	mber Previously Pa ber Previously Paid	id For DI THE	S SPACE in	loca thai	3 anter T		ODIT. FEE of in the ap		·	R	0017. FEE L mn 1.		

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